



PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2008

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1540.00

**Complete if Known**

Application Number	10/823,306
Filing Date	2004-04-13
First Named Inventor	E. Cohen
Examiner Name	Pardo, T.N
Art Unit	2165
Attorney Docket No.	113062 CON-1

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account Number: 500,317 Deposit Account Name: William Ryan

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25

Each independent claim over 3 (including Reissues)

210	105
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Multiple dependent claims

370	185
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

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Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): Filing a Petition to revive unintentionally abandoned application

1,540.00

**SUBMITTED BY**

Signature

Registration No. 24,434  
(Attorney/Agent)

Telephone 336-286-5712

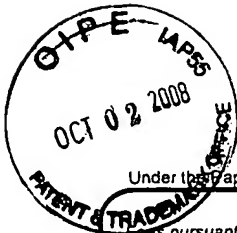
Name (Print/Type)

William Ryan, Attorney at Law

Date 2008-09-29

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**Complete if Known**

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First Named Inventor	E. Cohen
Examiner Name	Pardo, T.N
Art Unit	2165
Attorney Docket No.	113062 CON-1

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Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
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**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	<u>Small Entity</u> Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 20 or HP = _____ x _____ = _____		
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<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
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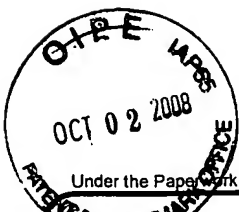
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**SUBMITTED BY**

Signature	<u>William Ryan</u>	Registration No. (Attorney/Agent) 24,434	Telephone 336-286-5712
Name (Print/Type)	William Ryan, Attorney at Law		Date 2008-09-29

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**Complete if Known**

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First Named Inventor	E. Cohen
Examiner Name	Pardo, T.N
Art Unit	2165
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Fees Paid (\$)
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Other (e.g., late filing surcharge): TWO Terminal Disclaimers (37CFR 1.20(d)) over 6,751,608 &amp; 6,330,561

260
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**SUBMITTED BY**

Signature	<u>William Ryan</u>	Registration No. (Attorney/Agent) 24,434	Telephone 336-286-5712
Name (Print/Type)	William Ryan, Attorney at Law	Date 2008-09-29	

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